
myWCB Online User Guide for Chiropractors

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Welcome to myWCB's Online Services

Introduction

With access to myWCB, chiropractors can electronically submit patient injury reports and invoices to WCB-Alberta.

System Availability

Electronic injury reporting is available daily; please refer to the online maintenance schedule available on our website at http://www.wcb.ab.ca/pdfs/providers/injury_report_sched.pdf

System Requirements

- Microsoft Internet Explorer (6.0 or 7.0)
- Adobe Reader (6.0 or higher)
- High speed internet connection

Technical Support

Should you require assistance when using our online services, the eBusiness Support Team is available to answer your technical questions. They can be contacted at:

Email: ebusiness.support@wcb.ab.ca

Phone: 780 498 7688

Fax: 780 498 7866

The team is available from 8:00 am to 4:30 pm (MST) Monday through Friday.

Security

Each user requiring access to our online services will be issued a unique UserID and password. When a UserID is created, it is recommended that IDs *not* be shared with others. In addition, when an individual leaves an organization or no longer requires access to our systems, their UserID should be deactivated.

Our online services are accessible via a secure web channel using 128-bit Secure Socket Layer (SSL) encryption. All information transferred through our online services is transmitted using the highest level of protection available today.

To further enhance security, myWCB times out after 60 minutes of inactivity. Any unsaved information will be lost.

Getting Started

To request access to myWCB online services, please follow the steps below:

1. Go to the myWCB Sign In page at <https://my.wcb.ab.ca> and click the Sign up now button.

WCB Workers' Compensation Board - Alberta myWCB

myWCB Sign In ? General Announcements

Enter your UserID and Password to sign in to myWCB:

UserID: * Forgot UserID?

Password: * Forgot Password?

Sign in

New to myWCB?

Sign up now

By logging in or having access to myWCB, I am agreeing to these Terms and Conditions (effective July 25, 2010).

To quickly access myWCB in the future, we recommend you bookmark this page.

For assistance, please contact our eBusiness Support Team:

Email: ebusiness.support@wcb.ab.ca
Tel: 780-498-7688, toll-free in Alberta: 1-866-922-9221
Hours: 8:00 a.m. - 4:30 p.m., weekdays
Fax: 780-498-7866

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Web site terms of use • myWCB terms and conditions • Contact us

2. Complete the required field and click the Next button.
3. A suggested UserID will be provided. (It can be changed if required.) Enter and confirm the password. Click the Next button.
4. Select the Chiropractor radio button, enter the WCB billing number and select the role(s) you perform for the billing number you identified. Click the Next button.

Note: The role(s) you select will determine the level of access. Listed below are the roles and the associated myWCB online services they will allow you to access.

Role	Online Services
Chiropractic Clinic Administrator/Manager/Owner	<ul style="list-style-type: none">• create, modify, submit and view all chiropractic reports and invoices for the billing number
Chiropractic Provider	<ul style="list-style-type: none">• create chiropractic reports and invoices• modify and submit those created• view all reports and invoices for the billing number

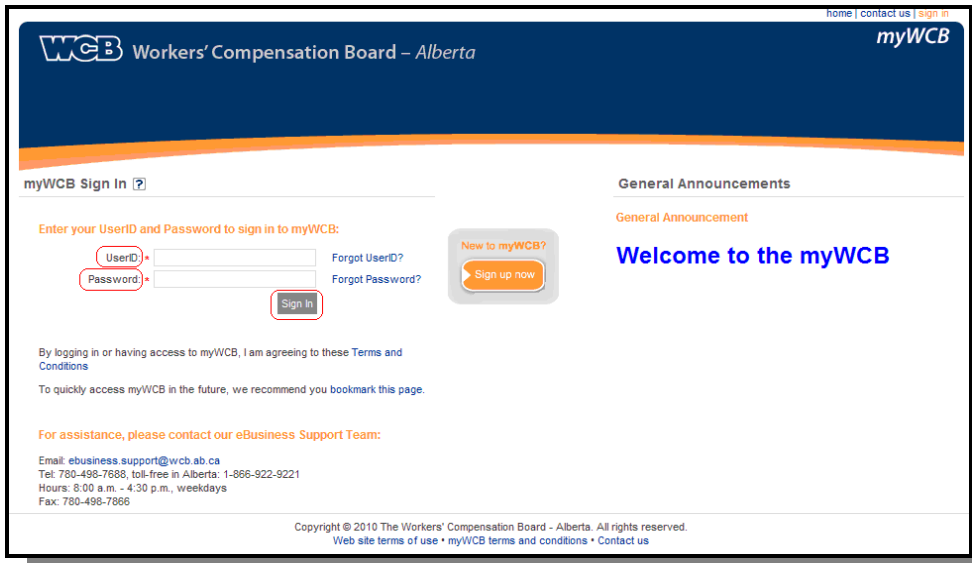
5. Enter the number of a WCB cheque or electronic funds transfer for the WCB billing number you identified. Click the Next button. If you are directed to the Confirmation screen, the key facts may have been disabled by your Online Administrator. Please complete steps six to eight and await an email advising you of your access status.

Note: You are allowed three attempts to answer the key fact questions correctly. After three unsuccessful attempts, you will be directed to the Confirmation page where you may modify the access you requested or Click the Submit button to send the access request to the Online Administrator. If an Online Administrator does not exist, the access request will be sent to the eBusiness Support Team. Upon receipt of your access request, the Online Administrator or the eBusiness Support Team may modify, approve or deny the request.

6. Review your request on the Confirmation screen and make any necessary changes by clicking on the applicable Modify button. Click the Submit button if no changes are required.
7. Click the Finish button to go to the Terms and Conditions screen.
8. Review and accept the terms and conditions by placing a checkmark beside “I agree to the terms and conditions” and click the Next button. You will now be logged on with your UserID.

Logging in

1. Go to the myWCB Sign In page at <https://my.wcb.ab.ca>.



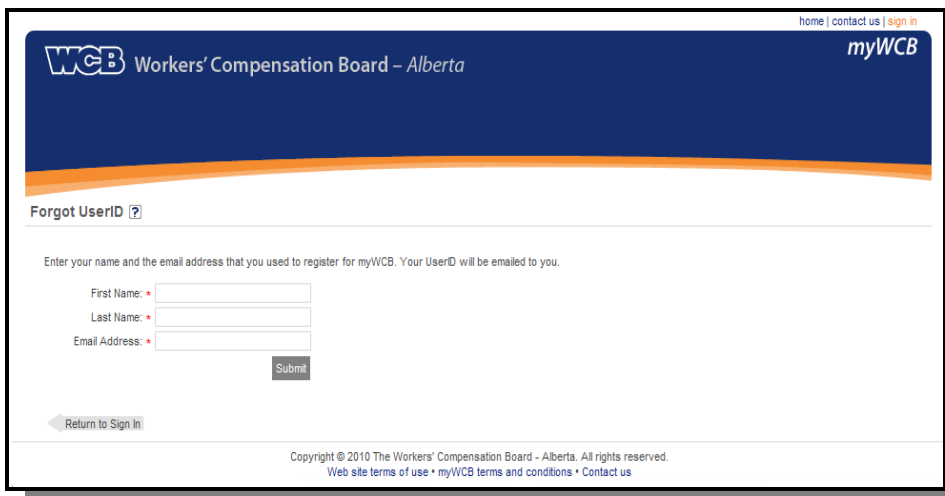
The screenshot shows the myWCB Sign In page. At the top, there is a header with the WCB logo and the text "Workers' Compensation Board - Alberta" and "myWCB". Below the header, there is a "myWCB Sign In" section with a form. The form has two input fields: "UserID" and "Password", both with red asterisks indicating they are required. There is a "Sign In" button below the "Password" field. To the right of the "Sign In" button, there are links for "Forgot UserID?" and "Forgot Password?". Above the "Sign In" button, there is a "New to myWCB?" button with a "Sign up now" link. To the right of the sign in section, there is a "General Announcements" section with a "Welcome to the myWCB" message. At the bottom of the page, there is a footer with contact information for the eBusiness Support Team and a copyright notice for 2010.

2. Enter your UserID and password and then click the **Sign In** button. Please note, the password is case sensitive.

Note: You will be required to accept the terms and conditions on your first sign in.

Forgot UserID

1. Click the Forgot UserID link from the Sign In page. The following window will be displayed.



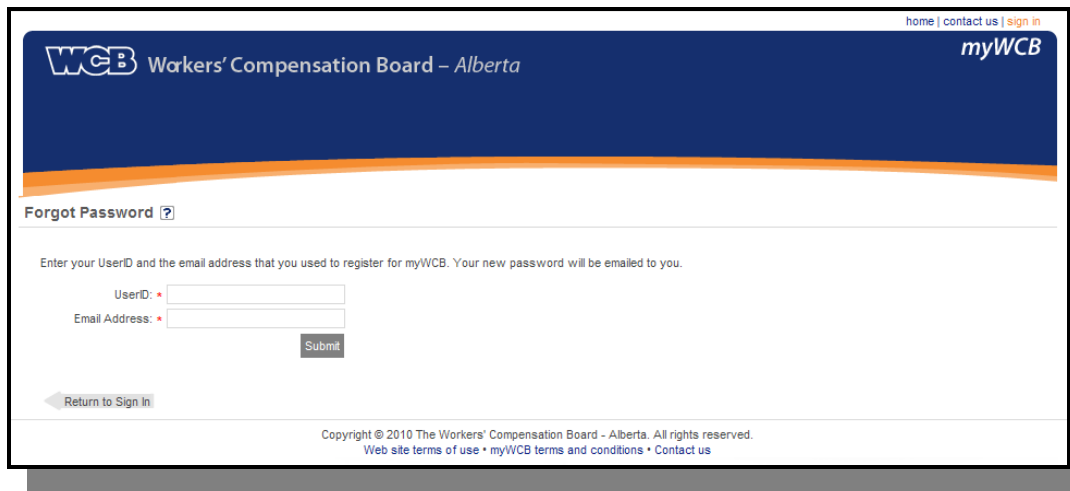
The screenshot shows the myWCB Forgot UserID page. At the top, there is a header with the WCB logo and the text "Workers' Compensation Board - Alberta" and "myWCB". Below the header, there is a "Forgot UserID" section with a form. The form has three input fields: "First Name", "Last Name", and "Email Address", all with red asterisks indicating they are required. There is a "Submit" button below the "Email Address" field. To the left of the "Submit" button, there is a "Return to Sign In" link. At the bottom of the page, there is a footer with a copyright notice for 2010.

2. Enter your first name, last name and email address associated with your UserID. Click the **Submit** button.

Note: If you are unable to provide the required information, please contact your Online Administrator or the eBusiness Support Team.

Forgot Password

1. Click the Forgot Password link from the Sign In page. The following window will be displayed.

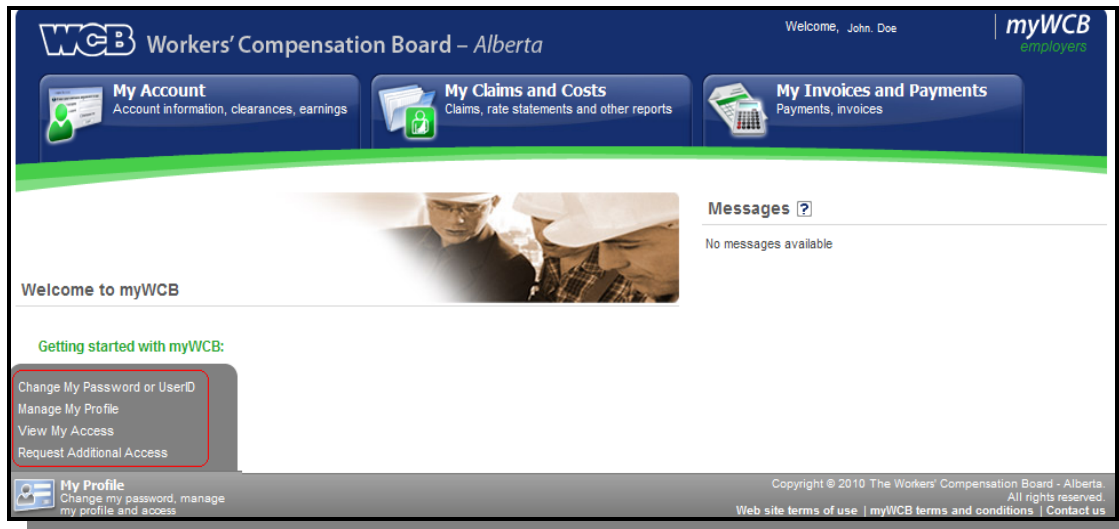


The screenshot shows the 'Forgot Password' page of the WCB myWCB portal. The header features the WCB logo and 'Workers' Compensation Board - Alberta' on the left, and 'home | contact us | sign in' and 'myWCB' on the right. The main heading is 'Forgot Password' with a help icon. Below it, a message states: 'Enter your UserID and the email address that you used to register for myWCB. Your new password will be emailed to you.' There are two input fields: 'UserID' and 'Email Address', both with red asterisks indicating required fields. A 'Submit' button is positioned below the 'Email Address' field. A 'Return to Sign In' link is located at the bottom left. The footer contains copyright information: 'Copyright © 2010 The Workers' Compensation Board - Alberta. All rights reserved.' and links for 'Web site terms of use', 'myWCB terms and conditions', and 'Contact us'.

2. Enter your UserID and email address. Click the Submit button. A new temporary password will be emailed to you.

Making changes to My Profile and Access

The **My Profile** menu is found in the bottom left of the screen.



The **My Profile** menu provides the following options:

1. Change My Password or UserID
2. Manage My Profile - make changes to your personal and/or company information
3. View My Access – view your current access to myWCB
4. Request Additional Access – request or modify your current access.

Submitting and reviewing reports or invoices

To view or submit treatment reports and invoices go to **My Account**, click on **Submit Chiropractor Reports and Invoices**.



The online injury reporting window will now be displayed for you to view, submit your reports and invoices.

The screenshot displays the 'IC056 - Chiropractor First Report' form. The form is organized into several sections. Section 1 includes 'Transaction ID' and 'Chiropractor's Name'. Section 2 has 'WCB Claim Number' and 'Does Worker have an Alberta PHN?' with 'Yes' and 'No' radio buttons. Section 3 contains 'Personal Health Number' and 'Clinic Reference Number'. Section 4 includes 'Worker Surname', 'Worker First Name', 'Worker Middle Name', and 'Worker Date of Birth (YYYYMMDD)'. Section 5 has 'Address Line 1' and 'Address Line 2'. The bottom section includes 'City/Town', 'Province' (a dropdown menu showing 'AB'), 'Postal Code', 'Country Code' (a dropdown menu showing 'Canada/USA/Caribbean (1)'), 'Area Code', 'Telephone Number', 'Report Completion Date (YYYYMMDD)', and 'Date of Injury (YYYYMMDD)'. There are also radio buttons for 'Lost Time' with options 'Time Loss' and 'No Time Loss'. At the bottom of the form, there are two buttons: 'SAVE CHANGES' and 'SUBMIT FOR PROCESSING'. The footer on the left side of the form reads 'Copyright © 2002 Workers' Compensation Board - Alberta. All rights reserved.'

Reporting an Injury

Chiropractors can use online reporting to submit their First Reports (C-056), Progress/Discharge Reports (C-352), Finalize Treatment Reports (C-704) and Invoices (C-552). In addition, chiropractic treatment extension requests can also be submitted for approval using online reporting.

Electronic submission of reports is mandatory for Chiropractic clinics. This method of reporting replaces the traditional faxing method for report and invoice submission.

There are several advantages to reporting an injury online:

- Faster payments – Report fees are automatically approved for the next cheque run as soon as WCB receives the electronic submission. Direct deposit makes receiving payments even faster!
- Flexible reporting options – Multiple users can access the same reports from any location with internet access.
- Faster approvals – Reports are in the hands of case managers sooner to expedite approval for the payment of the fee for service. Your information reaches WCB decision-makers within hours of submission.
- Report Management – The system can be used as a centralized storage medium, allowing you to store and organize claim reports.

Navigating through Injury Reporting

This section will describe the screen layout of reporting an injury online. There are five areas of the screen as described below:

The screenshot shows the WCB Alberta online injury reporting form, titled "C056 - Chiropractor First Report". The form is divided into five sections, each with a corresponding tab on the left sidebar. The sections are:

- Section 1:** Transaction ID, Chiropractor's Name (Please Choose), Lost Time (Time Loss, No Time Loss).
- Section 2:** WCB Claim Number, Does Worker have an Alberta PHN? (Yes, No), Personal Health Number, Clinic Reference Number.
- Section 3:** Worker Surname, Worker First Name, Worker Middle Name, Worker Date of Birth (YYYYMMDD).
- Section 4:** Address Line 1, Address Line 2, City/Town, Province (AB), Postal Code, Report Completion Date (YYYYMMDD).
- Section 5:** Country Code (Canada/USA/Caribbean (1)), Area Code, Telephone Number, Date of Injury (YYYYMMDD).

The form also includes a sidebar with tabs for Section 1, Section 2, Section 3, Section 4, Section 5, and Invoice. At the bottom, there are buttons for "SAVE CHANGES" and "SUBMIT FOR PROCESSING".

1. **Function tabs** – Provide access to different areas of electronic injury reporting. Function tabs allow you to **enter** a new **First Report**, **create Progress/Discharge Reports** and **Invoices**, and Search for both completed reports and reports that are still in progress.
2. **Report name** – Identifies the type of report currently being edited.
3. **Section tabs** – Used to toggle among the different sections of the report currently being edited.
4. **Save Changes & Submit For Processing buttons** – The **Save Changes** button saves all information entered in the report that is being edited. At this stage, no data validation or error checking is performed, and the report cannot be reviewed by WCB staff for adjudication purposes. The **Submit For Processing** button first checks all inputted data for completeness and correctness and, if no errors are found, will transmit the report to the WCB for claim adjudication.
5. **Help & Logout links** – The **Help** link opens a new browser window containing a comprehensive help document. The **Logout** link will allow you to securely exit and return you to the **myWCB** home screen.

Working with Reports

The First Report (C-056)

Upon entering injury reporting, you are always automatically provided with a new, blank First Report. Electronic reporting requires this report to be submitted first for the patient, before any subsequent reports can be created. As per the 2004 Chiropractic Contract, clinics are required to submit the First Report to the WCB within two (2) business days of the date of the initial patient assessment.

WCB Workers' Compensation Board Alberta

First Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

(C056 - Chiropractor First Report)

Section 1 Transaction ID: Chiropractor's Name: Please Choose Lost Time: ☐ Time Loss ☐ No Time Loss

Section 2 WCB Claim Number: Does Worker have an Alberta PHN? ☐ Yes ☐ No Personal Health Number: Clinic Reference Number:

Section 3 Worker Surname: Worker First Name: Worker Middle Name: Worker Date of Birth (YYYYMMDD):

Section 4 Address Line 1: Address Line 2:

Section 5 City/Town: Province: AB Postal Code: Report Completion Date (YYYYMMDD):

Country Code: Canada/USA/Caribbean (1) Area Code: Telephone Number: Date of Injury (YYYYMMDD):

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SAVE CHANGES SUBMIT FOR PROCESSING

General Layout

The First Report is divided into 5 different sections (plus invoice), as indicated by the corresponding tabs along the left side of the screen. By simply clicking from tab to tab, you may navigate from one section of the report to the next. The sections of the report can be completed in any order; however, all five sections of the report should be completed first before any attempt is made to submit the report. While it is not mandatory to Save Changes after every section (you could, in theory, fill out all sections of the report, then click on Save Changes to save everything), it is *highly recommended* that you save regularly to avoid losing data due to timing out or lost internet connection issues.

Entering Data

Each section of the report contains a number of labeled question fields and a corresponding text box, pull-down menu, or radio buttons for you to provide your answer. Text boxes permit you to enter and edit freehand information using a keyboard. Pull-down menus and radio buttons allow you to select an answer from a simplified list of choices using a mouse. If you do not find a specific answer you require in a pull-down menu, simply select the option that best matches the answer.

In text fields where specific formatting is required (for instance, date fields), the system will display the formatting style in the field label.

Note: Do not cut and paste text directly from your word processor. Advanced text editors such as Microsoft Word often contain special characters that cannot be interpreted. See the [Frequently Asked Questions](#) at the end of the document for more information about cutting and pasting text.

For a detailed explanation of what a particular field is asking, or to find out if a specific field is mandatory to be answered, consult the online Help file. Because the Help file always opens in a new window, you can continue working on your report even while the Help file is open (please ensure all pop-up blockers are disabled in order to use this feature). The Help file also contains useful suggestions and examples for properly filling out individual fields.

Saving and submitting

When the Save Changes button is clicked, all information that you have entered in *every* section of the report will be saved remotely on our secure servers. No data is ever saved locally to your machine. Should your computer or network system crash or be compromised, no confidential information will be lost and all report data will remain safely accessible through any other machine having secure internet access. Keep in mind that when the Save Changes button is clicked, nothing is ever submitted for review by WCB.

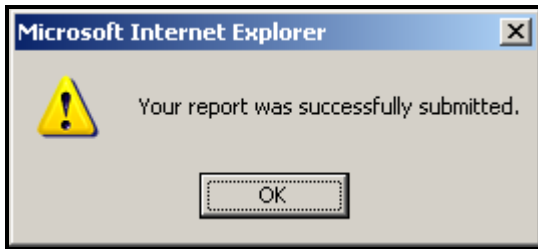
The fact that the report is saved to a central location also means that reports do not have to be entered all at once. You can start filling out portions of a report, save a draft copy, then continue working on it at a later time or even from a different machine.

The first time a report is successfully saved, a Transaction ID will be automatically assigned to the report (found on Section 1 of the First Report). The Transaction ID is a unique report identifier that is assigned to each and every report that is created and saved in the system. While most clinics will not need to record or reference this number, the *eBusiness Support Team* may request this number when you call for assistance.

Once you have completed all sections of the report and clicks on the Submit for Processing button, the following will occur:

1. All data in the report will be saved.

2. The system will check the report for errors – either fields that contain invalid data, or mandatory fields that have been left blank. If errors are found, the system will individually identify and explain every error, which must be corrected by you. You must click on Submit for Processing once again in order to continue.
3. If further errors are still found, you must continue correcting and submitting the report until the message stating “The Report was successfully submitted” is received. You may attempt to submit the report as many times as is necessary without causing problems. WCB does not examine the report until it has been successfully submitted.



The following chart summarizes the differences between reports that have been submitted and those that have only been saved:

Saved Reports	Submitted Reports
<ul style="list-style-type: none">▪ Are not examined by WCB.▪ Can be edited, printed and even deleted at your convenience.	<ul style="list-style-type: none">▪ Become part of an official claim file.▪ Can be printed, but not edited or deleted.

Correcting Errors

After clicking the Submit for Processing button, the report is checked for accuracy and completeness before being transmitted to WCB. If the system finds any errors, you will be notified in three ways:

1. Section tabs will be highlighted with red text if there are errors in that section.
2. Within each section, individual fields that contain errors will be highlighted with red text.
3. Error descriptions will be displayed at the top of each section.

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First Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

C056 - Chiropractor First Report

Section 1 Section Errors:

121045: Lost Time is a required field
 121021: Worker PHN is required since Alberta PHN Indicator is Yes
 121045: Date of Injury is a required field

Transaction ID: 85100 Chiropractor's Name: A1A11101 - ABC CHIROPRACTIC

Lost Time: ☒ Time Loss ☐ No Time Loss

WCB Claim Number: Does Worker have an Alberta PHN? ☒ Yes ☐ No Personal Health Number: Clinic Reference Number:

Worker Surname: Doe Worker First Name: John Worker Middle Name: Worker Date of Birth (YYYYMMDD): 1970-04-18

Address Line 1: 123 Any Street Address Line 2:

City/Town: Anytown Province: AB Postal Code: Report Completion Date (YYYYMMDD):

Country Code: Canada/USA/Caribbean (1) Area Code: 780 Telephone Number: 555-5555 Date of Injury (YYYYMMDD):

SAVE CHANGES SUBMIT FOR PROCESSING

To correct errors, click on any section tab where the tab text is highlighted in red. Within that section, look for the individual fields marked in red – these are the fields that need to be corrected. Use the Section Error descriptions at the top of the page to determine how to fix the error.

Some errors may appear more complex than others. The simplest errors arise from mandatory fields that have not been completed (most fields are always mandatory; however, some *become* mandatory, depending on what was answered in a previous question). For example, if you indicate in Section 5 that there are work restrictions, then a description of those restrictions must be entered (in contrast, if there is no work restrictions, then the description field must be left blank).

Other errors messages may emerge due to invalid or illogical data that has been entered. Examples of this include invalid postal codes or Health Care numbers, or a date of examination that occurs before the date of injury. To best identify the nature of the error, refer to the error description(s) at the top of each section. If the nature of the error is still not clear, contact the eBusiness Support Team for assistance.

Once all errors have been corrected, the system will allow the report to be submitted for processing. You will receive a pop-up message stating “Your report has been successfully submitted”, indicating that the report has successfully been transmitted to WCB.

Important note: Once a report has been submitted, the user is no longer able to make additions or modifications to the report. If there is any information that was mistakenly omitted or a correction needs to be made to the report, please refer to the Contact Us section below for this information

Invoicing with the First Report

The 2008 Chiropractic Contract specifies only two occasions when an invoice should be submitted to WCB during the regular course of treatment:

1. The first invoice shall be submitted along with the Chiropractic Progress Report (after the third week of treatment)
2. The second invoice shall be submitted along with the Chiropractic Discharge Report.

Normally, an invoice is not submitted with the First Report; therefore, the electronic reporting will not allow an invoice to be submitted with this report *unless* the patient is immediately being discharged (a discharge is indicated by choosing “Yes” to the Treatment Complete field in Section 5 of the report). If, and only if, the patient is being discharged on the first report, you may submit an invoice for the initial assessment only, as shown below.

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First Report New Report from Existing Search Reports Payment Remittance Help | Logout

[C056 - Chiropractor First Report]

Section 1 Treating Chiropractor:
Diagnostic Code 1: Diagnostic Code 2: Diagnostic Code 3:

Section 2

Section 3

Section 4

Section 5

Invoice

FEE FOR SERVICE			
Date of Service (YYYYMMDD)	Health Service Code	Calls	Fees Submitted

Calculate

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SAVE CHANGES SUBMIT FOR PROCESSING

To do this, simply type in the Date of Service, select 'B522' from the Health Service Code pull-down box, then click on the 'Calculate' button. The system will automatically populate the Calls field with '1' and will calculate the contracted fee for service in the Fees Submitted field. Once the First Report has been completely filled out, click on the 'Submit For Processing' button to submit both your invoice and First Report to WCB for processing and payment.

The Progress/Discharge Report (C-352)

Chiropractors are required to submit a Progress Report at the end of the third week of treatment, and a Discharge Report within two business days of discharging the patient from treatment. In online reporting, the Progress Report and the Discharge Report appear as the combined Progress/Discharge Report (C-352). This report also contains an invoice for you to submit your billing for treatments and sundry items.

To distinguish between a Progress and a Discharge Report, you will do the following:

1. In Section 1 of the report, you will identify the Report Type by selecting either 'Progress' or 'Discharge'
2. In Section 4 of the report, if the report is a Progress Report, you will answer 'No' to the question, "Treatment Complete". If the report is a Discharge Report, you will answer 'Yes'.

Creating a Progress/Discharge Report

Prior to being allowed to create a Progress/Discharge Report, a submitted First Report for the patient must already exist in the system.

To create a Progress/Discharge Report:

1. Click on the New Report from Existing tab at the top of the page.

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First Report New Report from Existing Search Reports Payment Remittance Help | Logout

[New From Existing]

Please enter your search criteria, and click Search for resulting list of matching reports

Transaction ID	Last Name	Processed Claim Number
<input type="text"/>	<input type="text" value="Doe"/>	<input type="text"/>
Date of Birth	Date of Injury	Report Status
<input type="text"/>	<input type="text"/>	<input type="text" value="Please Choose"/>
Personal Health Number	<input type="radio"/> Active <input type="radio"/> Historical	Treatment Provider
<input type="text"/>		<input type="text" value="Please Choose"/>
Sort By		Create Report As
<input type="radio"/> Transaction ID	<input checked="" type="radio"/> Last Name	<input type="radio"/> Claim Number
<input type="radio"/> Date of Injury	<input type="radio"/> Report Status	<input type="radio"/> Treatment Provider

SEARCH

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Alberta.
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2. Identify the patient for whom the Progress Report is to be created by filling in one or more search criteria fields. The options available to search by are as follows:

Transaction ID – The unique report identification number that is automatically assigned to the report when it was first saved

Last Name – The patient's last name as it was entered on the previous report

Processed Claim Number – The claim number that was automatically assigned to the report, if the report has already been processed by the system after being submitted (this may not be the same as the claim number you manually entered on the report)

Date of Birth – The patient's date of birth. The format should be entered as YYYYMMDD

Date of Injury – The date of injury as it was entered on the report. The format should be entered as YYYYMMDD

Report Status – The options available in this selection box are:

- **Submitted** – The report has been successfully submitted to WCB, but it has not yet been processed.
- **Held for Manual Processing** – The report has been successfully submitted to WCB; however, the system is unable to successfully match the report to an existing claim on file
- **Manual Processing Complete** – The report has been submitted to WCB and was held for manual processing, but the Customer Records Clerk has finished processing the report and a claim number has been assigned.
- **Complete** – The report has been successfully submitted to WCB, was processed, and a claim number is assigned to the report.

Personal Health Number – The patient's Alberta Health Care number

Active/Historical – Allows you to choose between searching and viewing reports that are “active” versus reports that have been “moved to history”. For more information regarding Active and Historical reports, refer to the section on “Submitted Reports”, beginning on page 33.

Treatment Provider – the billing number/name of the treating chiropractor, selected from a drop-down list

Note: Although online reporting provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field (however, at least one search criteria is required to perform a search). The last name alone is usually sufficient to find the correct patient.

As an option, you may also select the field by which the search results will be sorted when the results are displayed (Last Name is selected by default).

3. In the Create Report As pull-down menu, select the option Chiropractor Progress/Discharge Report.
4. Click on the Search button. The system will now search for, and return, a summary of any submitted First Reports matching the search criteria entered.

[New From Existing]

Found: 1 Displaying: 1 - 1

Transaction ID: 614604	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1970-01-01
PHN:	Date of Injury: 2007-01-31	Treatment Provider: SMITH, DR...
Last Update: 2007-07-20	Claim Decision:	Report Type: Chiropract...
Report Status: Held for Man...		

Create New

MODIFY SEARCH

5. From the list of results, locate the correct patient and click on the corresponding Create New link.
6. The system will create a new Progress/Discharge Report for the patient that has been automatically pre-populated with basic information taken from the initial report.

From here the process of completing the Progress/Discharge Report is the same as completing a First Report. Refer to the steps described in the previous section for entering data, saving and submitting the report and correcting errors.

Discharging the Patient

To *discharge* a patient using a Progress/Discharge Report:

1. In Section 1, choose “Discharge” as the Report Type
2. In Section 4, answer “Yes” to the Treatment Complete field.

Requesting an Extension of Treatment

The Progress/Discharge Report provides the chiropractor with the ability to submit an online request for an extension of treatment. Such requests are made in conjunction with a second Progress/Discharge Report, submitted between the fifth and sixth week of treatment.

To request an extension of treatment:

1. **Do not discharge the patient. A final Progress/Discharge report will be submitted at the completion of the extended treatment period, at which time the patient will be discharged. In Section 1 of the report, select “Progress” as the Report Type. In Section 4, answer “No” in the Treatment Complete field.**
2. **Answer “Yes” to the question “Is this a request for treatment extension beyond the currently authorized timeframe?”, also found in Section 4 of the Progress/Discharge Report. Doing so will automatically activate the request to be delivered to WCB Chiropractic Consultant upon submission of the report. It is no longer necessary to fax the request to the Consultant.**

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First Report | New Report from Existing | Search Reports | Payment Remittance | Help | Logout

[C352 - Chiropractor Progress/Discharge Report]

Section 1 Treatment Complete ☐ Yes ☐ No

Section 2 Work Restrictions ☐ Yes ☐ No

If yes, choose: ☐ Permanent ☐ Temporary

Section 3 Employment Status at Discharge
Please Choose

Section 4 Was the worker working at time of this report?
Please Choose

Is the injury preventing worker from performing date of accident work?
☐ Yes ☐ No

If not working, does the worker have a job to return to?
☐ Yes ☐ No

Is modified or alternate work available?
☐ Yes ☐ No

Can modified or alternate work be performed?
☐ Yes ☐ No

Job Requirements Job requirements confirmed by:
Please Choose Please Choose

Any other relevant comments or observations?

Estimated Date of Return to Date of Accident Work (YYYYMMDD)

If yes, indicate current work capability
Please Choose

Explanation (if job requirements were not confirmed)

Is this a request for treatment extension beyond the currently authorized timeframe?
☐ Yes ☐ No

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- In Section 3 of the report, include the extension period requested when documenting the Treatment Plan and the Frequency and Duration.

Treatment Plan

Frequency and Duration

Invoicing on the Progress/Discharge Report

The clinic is required to submit an invoice to WCB along with both the Progress Report (submitted at the end of the third week of treatment) and the Discharge Report (submitted within two business days of discharge from treatment). Using the online reporting application, you are provided with an online invoice that can be filled out and submitted together with the Progress/Discharge Report.

WCB Workers' Compensation Board Alberta

First Report New Report from Existing Search Reports Payment Remittance Help | Logout

[C352 - Chiropractor Progress/Discharge Report]

Section 1
Section 2
Section 3
Section 4
Invoice

Treating Chiropractor: A1A11101 - ABC CHIROPRACTIC
Diagnostic Code 1: 917 Diagnostic Code 2: Diagnostic Code 3:

FEE FOR SERVICE [Next 10 >](#)

	Date of Service (YYYYMMDD)	Health Service Code	Calls	Fees Submitted
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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Calculate Sundry Items

SAVE CHANGES SUBMIT FOR PROCESSING

For each service provided to the patient:

1. Enter the Date of Service (in the format 'YYYYMMDD')
 - Select the corresponding Health Service Code from the drop-down list.
2. The Calls column is used solely for the purpose of identifying additional X-ray views and can be left blank when invoicing for the assessment or treatments (leaving it blank will cause the system to enter the value '1' by default).

Note that you will be unable to enter a value in the Fees Submitted field, as the values in this field will be automatically populated with the correct payment amount (as per Schedule "E" of the 2004 Chiropractic Contract) after the 'Calculate' button is clicked.

The invoice screen displays ten lines at a time. If additional lines are required, click on the [Next 10 >](#) link at the top right side of the screen to gain access to lines 11 through 20 of the invoice.

To submit fees for Sundry Items, click on the "Sundry Items" button to access the sundry items invoice screen.

Treating Chiropractor: A1A11101 - ABC CHIROPRACTIC

SUNDRY ITEMS				
	Date of Service (YYYYMMDD)	Health Service Code	Quantity	Fees Submitted
1.	2006-05-01	LR01 - Lumbar Roll	1	
2.				

For each sundry item provided to the patient:

1. Enter the Date of Service (in the format 'YYYYMMDD')
2. Select the item from the Health Service Code pull-down list*
3. Enter the Quantity of item(s) provided to the patient (in whole numbers).

Note that the Fees Submitted field is not editable, and will automatically be populated when the Calculate button is pressed.

You can return to the main invoice screen by clicking on the Return button.

The Chiropractor Finalize Treatment Report (C-704)

The Finalize Treatment Report is provided as a method for discharging the patient without having to fill out a complete Discharge Report. Finalize Treatment should be used *only* in cases where the patient needs to be discharged, but the chiropractor has no new information to report regarding the patient's progress or status. Examples of cases where a Finalize Treatment Report should be used include:

1. Non-compliance or Non-attendance – Chiropractic treatment for the patient has been terminated, either by the patient, or by WCB due to patient non-compliance or non-attendance. If the chiropractor does *not* have any new information to provide to WCB regarding the patient's condition or status since the last report was submitted, then the patient may be discharged by finalizing treatment. If there *is* a change or an update to the patient's status since the last report was submitted, a Discharge Report should be used instead.
2. Declined Extension Request – The chiropractor has requested an Extension for Treatment, which has subsequently been declined by the Chiropractic Consultant. Since the patient is never discharged when an Extension for Treatment is requested (through a second Progress Report), the patient must now be discharged with a Finalize Treatment Report.

A Report Fee is *not* paid for a Finalize Treatment Report.

Creating a Finalize Treatment Report

Prior to being allowed to create a Finalize Treatment Report, a submitted First Report for the patient must already exist in the system.

To create a Finalize Treatment Report:

1. Click on the New Report from Existing tab at the top of the screen.

The screenshot shows the 'New From Existing' tab selected in the WCB Alberta system. The interface includes a search form with the following fields and options:

- Transaction ID**: Text input field.
- Last Name**: Text input field with 'Doe' entered.
- Processed Claim Number**: Text input field.
- Date of Birth**: Text input field.
- Date of Injury**: Text input field.
- Report Status**: Dropdown menu with 'Please Choose' selected.
- Personal Health Number**: Text input field.
- Treatment Provider**: Dropdown menu with 'Please Choose' selected.
- Create Report As**: Dropdown menu with 'Please Choose' selected. The dropdown list is open, showing three options: 'Chiropractor Finalize Treatment' (highlighted), 'Chiropractor Additional Treatment Invoice', and 'Chiropractor Progress/Discharge Report'.
- Sort By**: Radio button options for Transaction ID, Last Name (selected), Claim Number, Date of Injury, Report Status, and Treatment Provider.
- Active/Inactive**: Radio button options for Active (selected) and Historical.
- SEARCH**: A blue button to execute the search.

At the top of the page, there are tabs for 'First Report', 'New Report from Existing' (selected), 'Search Reports', and 'Payment Remittance'. The WCB Alberta logo is in the top left corner, and 'Help | Logout' is in the top right corner.

2. Identify the patient for whom the Finalize Treatment Report is to be created by filling in one or more search criteria fields.

Note: Although the system provides the user with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.

3. In the Create Report As pull-down menu, select the option Chiropractor Finalize Treatment.

- Click on the Search button. The system will first search for, and then return, a summary of any submitted First Reports matching the search criteria entered.

The screenshot shows a search results page titled "[New From Existing]". It displays a summary of a found report with the following details:

Found: 1 Displaying: 1 - 1		
Transaction ID: 614601	Submitted Claim:	Processed Claim:
Last Name: Doe	First Name: John	Date of Birth: 1970-01-01
PHN:	Date of Injury: 2007-01-01	Account: 1234567
Last Update: 2007-07-20	Claim Decision:	Report Type: Employer's...
Report Status: Held for Man...		

At the bottom right, there is a "Create New" link and a "MODIFY SEARCH" button.

- From the ensuing list of results, locate the correct patient and click on the corresponding Create New link.
- The system will create a new Finalize Treatment Report that has been automatically pre-populated with basic information taken from the initial report.

The screenshot shows the "Chiropractor Finalize Treatment Report" form, titled "[C704 - Chiropractor Finalize Treatment Report]". The form is divided into two sections:

Section 1 (Transaction ID: [blank])

Section 2 (WCB Claim Number: [blank])

Does Worker have an Alberta PHN? ☐ Yes ☒ No

Personal Health Number: [blank] Clinic Reference Number: [blank]

Worker Surname: [Doe] Worker First Name: [John] Worker Middle Name: [blank] Worker Date of Birth (YYYYMMDD): [1970-04-18]

Address Line 1: [123 Any Street] Address Line 2: [blank]

City/Town: [Anytown] Province: [AB] Postal Code: [blank]

Country Code: [Canada/USA/Caribbean (1)] Area Code: [555] Telephone Number: [555-5555] Date of Injury (YYYYMMDD): [2005-05-09]

At the bottom, there are two buttons: "SAVE CHANGES" and "SUBMIT FOR PROCESSING".

The Finalize Treatment Report consists of two Section tabs, with the fields in Section 1 pre-populated with patient data taken from the First Report. To complete the report, simply verify that the information in Section 1 is correct, and then click on the Section 2 tab to continue.

The Section 2 tab contains only one question: Employment Status at Discharge. Select the answer that best reflects the current employment status of the patient from the drop-down list, then click on the Submit For Processing button to submit the report.

Note: The Finalize Treatment Report *does not* include an invoice tab. If further billing is required after the Finalize Treatment Report has been submitted, it must be done through an Additional Treatment Invoice. Please refer to the next section below for more information on this type of invoice.

The Chiropractor Additional Treatment Invoice (C-552)

The Additional Treatment Invoice is provided to allow the service provider to invoice for services *after* the patient has been discharged. This invoice is a stand-alone invoice and is not attached to any type of report. Instances where a service provider may need to submit an Additional Treatment Invoice include:

1. Billing for treatments that were omitted in error from previously submitted invoices
2. Billing for Transitional (Return to Work) visits
3. Billing for services and sundry items on a patient for which a Finalize Treatment Report has been submitted.

Note: If the service provider has forgotten to bill for a service on their invoice submitted with their Progress Report and the patient is still active, they can simply wait until the Discharge Report is submitted to then include the omitted service. The online reporting application *will not* allow an Additional Treatment Invoice to be created for a patient that has not yet been discharged.

Creating an Additional Treatment Invoice

Prior to being allowed to create an Additional Treatment Invoice, the patient *must* be discharged first from the system (either through a Discharge Report or a Finalize Treatment Report).

To create an Additional Treatment Invoice:

1. Click on the New Report from Existing tab at the top of the screen.

WCB Workers' Compensation Board Alberta

First Report New Report from Existing Search Reports Payment Remittance Help | Logout

[New From Existing]

Please enter your search criteria, and click Search for resulting list of matching reports

Transaction ID	Last Name	Processed Claim Number
<input type="text"/>	<input type="text" value="Doe"/>	<input type="text"/>
Date of Birth	Date of Injury	Report Status
<input type="text"/>	<input type="text"/>	<input type="text" value="Please Choose"/>
Personal Health Number	<input type="radio"/> Active <input type="radio"/> Historical	Treatment Provider
<input type="text"/>		<input type="text" value="Please Choose"/>
Sort By		Create Report As
<input type="radio"/> Transaction ID	<input checked="" type="radio"/> Last Name	<input type="radio"/> Claim Number
<input type="radio"/> Date of Injury	<input type="radio"/> Report Status	<input type="radio"/> Treatment Provider

SEARCH

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2. Identify the patient for whom the Additional Treatment Invoice is to be created by filling in one or more search criteria fields.

Note: Although the system provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.

3. In the Create Report As pull-down menu, select the option Chiropractor Additional Treatment Invoice.
4. Click on the Search button. The system will first search for, and return, a summary of any submitted Discharge or Finalize Treatment Reports matching the search criteria entered.

[New From Existing]

Found: 1 Displaying: 1 - 1

Transaction ID: 49	Submitted Claim: 999 9999	Processed Claim: 888 8888
Last Name: Doe	First Name: John	Date of Birth: 1970-01-01
PHN:	Date of Injury: 2006-01-01	Treatment Provider: Dr. Smith
Last Update: 2006-05-19	Report Type: Chiropractor Finalize Treatment Rep...	
Report Status: Complete	Reason:	

[Create New](#)

[MODIFY SEARCH](#)

5. From the ensuing list of results, locate the correct patient and click on the corresponding Create New link.
6. The system will create a new Additional Treatment Invoice that has been automatically pre-populated with the patient's basic information taken from the Discharge or Finalize Treatment report.

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First Report New Report from Existing Search Reports Payment Remittance Help Logout

[C552 - Additional Treatment Invoice]

Section 1 Transaction ID:

Invoice

WCB Claim Number Does Worker have an Alberta PHN? Personal Health Number Clinic Reference Number

☐ Yes ☒ No

Worker Surname Worker First Name Worker Middle Name Worker Date of Birth (YYYYMMDD)

Doe John 1970-01-01

Address Line 1 Address Line 2

123 Any Street

City/Town Province Postal Code

Anytown AB

Country Code Area Code Telephone Number Date of Injury (YYYYMMDD)

Canada/USA/Caribbean (1) 780 555-5555 2006-01-01

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[SAVE CHANGES](#) [SUBMIT FOR PROCESSING](#)

The Additional Treatment Invoice consists of two tabs, with the fields in Section 1 pre-populated with patient data taken from the Discharge or Finalize Treatment Report. To complete the report, simply verify that the information in Section 1 is correct, click on the Invoice tab to be taken to a blank invoice form. This invoice is identical to the invoice attached to the Progress/Discharge Report.

Retrieving and Printing Reports

Saved Reports

Once a report has been saved, you can retrieve the report at a later time or date to continue modifying it. Because the reports are saved remotely on WCB's servers, you can access the saved report from *any* machine having Internet access. To retrieve a previously saved report:

1. Go in to the injury reporting system.
2. Click on the Search Reports tab at the top of the screen.

The screenshot shows the WCB Alberta website's 'Search Reports' interface. At the top, there is a navigation bar with tabs for 'First Report', 'New Report from Existing', 'Search Reports' (which is active), and 'Payment Remittance'. To the right of these tabs are links for 'Help' and 'Logout'. Below the navigation bar, there is a search form titled 'Please enter your search criteria, and click Search for resulting list of matching reports'. The form contains several input fields: 'Transaction ID', 'Last Name' (with 'Doe' entered), 'Processed Claim Number', 'Date of Birth', 'Date of Injury', 'Report Status' (a dropdown menu showing 'Please Choose'), 'Personal Health Number', and 'Treatment Provider' (another dropdown menu showing 'Please Choose'). There are also radio buttons for 'Active' and 'Historical'. Below these fields is a 'Sort By' section with radio buttons for 'Transaction ID', 'Last Name' (selected), 'Claim Number', 'Date of Birth', 'Date of Injury', 'Report Status', and 'Treatment Provider'. A 'SEARCH' button is located at the bottom right of the form. In the bottom left corner, there is a copyright notice: 'Copyright © 2002 Workers' Compensation Board - Alberta. All rights reserved.'

3. Identify the patient to whom the report belongs by filling in one or more search criteria fields. You may also optionally select a method by which the search results will be sorted ('Last Name' is selected by default).

Note: Although online reporting provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.

4. Click on the Search button. The system will first search for, and then return, a summary of all reports matching the search criteria entered.

The screenshot displays the WCB Alberta website's search results page. At the top, the WCB logo and 'Workers' Compensation Board Alberta' are visible. Navigation tabs include 'First Report', 'New Report from Existing', 'Search Reports' (which is active), and 'Payment Remittance'. A 'Help | Logout' link is also present. Below the navigation bar, a search bar contains the text '[Search]'. The main content area shows two search results for 'EMPLOYERS REPORT'. Each result is presented in a table-like format with three columns: Transaction ID, Submitted Claim, and Processed Claim. The first result (Transaction ID: 614604) has a 'Report Status' of 'Held for Man...'. The second result (Transaction ID: 614607) has a 'Report Status' of 'Incomplete'. For the 'Incomplete' report, there are links for 'Open', 'Delete', and 'View & Print'. A 'MODIFY SEARCH' button is located at the bottom right of the results area. A copyright notice for 2002 is visible in the bottom left corner.

Found: 2 Displaying: 1 - 2		
Transaction ID: 614604 Last Name: Doe PHN: Last Update: 2007-07-20 Report Status: Held for Man...	Submitted Claim: First Name: John Date of Injury: 2007-01-31 Claim Decision:	Processed Claim: Date of Birth: 1970-01-01 Treatment Provider: REDPATH... Report Type: Chiropract... View & Print
Transaction ID: 614607 Last Name: Doe PHN: Last Update: 2007-07-20 Report Status: Incomplete	Submitted Claim: First Name: John Date of Injury: 2007-01-31 Claim Decision:	Processed Claim: Date of Birth: 1970-01-01 Treatment Provider: REDPATH... Report Type: Chiropract... Open Delete View & Print

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MODIFY SEARCH

5. From the list of results, locate the exact report required to be modified by examining the information provided in each report summary. Note that any reports with a Report Status of 'Incomplete' means that the report has not yet been submitted to WCB. Such reports will be accompanied by both an Open link and a Delete link. First Reports and Progress/Discharge Reports with a report status of 'Incomplete' will also have a third option to View & Print the report.
6. To resume modifying the report, click on the Open link. The report will be re-opened for modification, containing all information that was previously entered and saved.
7. To permanently remove the incomplete report from the system, click on the Delete link. Before deleting the report, the system will ask the user to confirm their choice to delete the report.
Note: Doing this will permanently delete the report from the system. You will no longer be able to access or retrieve the report.
8. To print a hardcopy of the report, click on the View & Print link. A PDF (Portable Document Format) copy of the report will open in a new window using Adobe Reader®. You can print a copy of the report from here. Note that all incomplete reports that are viewed or printed will contain a "Draft" watermark, indicating that the report has not yet been submitted. Once the report has been submitted and reprinted, the "Draft" watermark will disappear.

Submitted Reports

Once a report has been submitted, the system will immediately and automatically attempt to match the report to an existing claim on file. If the system finds a matching claim, it will assign the claim number to the report, which can be retrieved by you. Reports that have been submitted may no longer be modified or deleted; however, they are still retrievable through the system for the purpose of viewing or printing.

To retrieve a submitted report, you must first search for the report. Since submitted reports are saved remotely on WCB's servers, they may be accessed from any computer with Internet access. To retrieve a submitted report:

1. Go to My Account, click on Submit Chiropractor Reports and Invoices.
2. Click on the Search Reports tab at the top of the screen.

The screenshot shows the 'Search Reports' interface of the WCB Alberta website. At the top, there is a navigation bar with the WCB logo and the text 'Workers' Compensation Board Alberta'. To the right of the logo are four tabs: 'First Report', 'New Report from Existing', 'Search Reports' (which is highlighted), and 'Payment Remittance'. Further right are links for 'Help' and 'Logout'. Below the navigation bar, the page title is '[Search]'. The main content area has a yellow background and contains the following fields and options:

- A header instruction: 'Please enter your search criteria, and click Search for resulting list of matching reports'.
- Search criteria fields:
 - Transaction ID: [Text Input]
 - Last Name: [Text Input] (containing 'Doe')
 - Processed Claim Number: [Text Input]
 - Date of Birth: [Text Input]
 - Date of Injury: [Text Input]
 - Report Status: [Dropdown Menu] (containing 'Please Choose')
 - Personal Health Number: [Text Input]
 - Treatment Provider: [Dropdown Menu] (containing 'Please Choose')
 - Radio buttons for 'Active' and 'Historical'.
- Sort By section with radio buttons:
 - Transaction ID
 - Last Name (selected by default)
 - Claim Number
 - Date of Birth
 - Date of Injury
 - Report Status
 - Treatment Provider
- A blue 'SEARCH' button at the bottom right.

At the bottom left of the form, there is a small copyright notice: 'Copyright © 2002 Workers' Compensation Board Alberta. All rights reserved.'

3. Identify the patient to whom the report belongs by filling in one or more search criteria fields. You may also optionally select a method by which the search results will be sorted ('Last Name' is selected by default).

Note: Although the system provides you with many options by which the patient may be identified, it is not necessary to fill in every search criteria field. In fact, the last name alone is usually sufficient to find the correct patient.

4. Click on the Search button. The system will now search for and return a summary of all reports matching the search criteria entered.

The screenshot shows the WCB Alberta website interface. At the top, there is a navigation bar with the WCB logo and the text 'Workers' Compensation Board Alberta'. To the right of the logo are buttons for 'First Report', 'New Report from Existing', 'Search Reports' (which is highlighted), and 'Payment Remittance'. Further right are links for 'Help' and 'Logout'.

Below the navigation bar is a search bar with the text '[Search]'. Below the search bar, there is a yellow box containing the search results. The results are displayed in a table-like format with three columns: Transaction ID, Submitted Claim, and Processed Claim. The first result is for Transaction ID 614604, and the second is for Transaction ID 614607. Both results show the same personal information (Last Name: Doe, PHN, Last Update: 2007-07-20) but differ in their Report Status (Held for Man... vs. Incomplete) and Claim Decision.

Transaction ID	Submitted Claim	Processed Claim
614604	First Name: John Date of Injury: 2007-01-31 Claim Decision:	Date of Birth: 1970-01-01 Treatment Provider: REDPATH... Report Type: Chiropract...
614607	First Name: John Date of Injury: 2007-01-31 Claim Decision:	Date of Birth: 1970-01-01 Treatment Provider: REDPATH... Report Type: Chiropract...

At the bottom of the yellow box, there is a 'MODIFY SEARCH' button. In the bottom left corner of the page, there is a copyright notice: 'Copyright © 2002 Workers' Compensation Board Alberta. All rights reserved.'

- From the ensuing list of results, locate the report required to be viewed and/or printed by examining the information provided in each report summary.

Submitted reports are any reports which display a Report Status *other than* “Incomplete”. Specifically, submitted reports will have one of the following four potential report statuses:

- Submitted** – The report has been successfully submitted to WCB, but it has not yet been processed.
- Complete** – The report has been successfully submitted to WCB, has been processed, and a claim number has been assigned to the report. You will find the assigned claim number in the Processed Claim field when viewing the report summary details on the Search screen.
- Held for Manual Processing** – The report has been submitted to WCB; however, the system is unable to successfully match the report to an existing claim on file. You will find an accompanying Reason for any reports that are held for manual processing. The most common cause for reports having this status is due to a discrepancy in the data provided in the report, and what has been reported in prior report submissions by the worker, employer or physician. Because the report is unable to be automatically processed by the system, it must now be manually processed and matched to a claim by a Customer Records Clerk.
- Manual Processing Complete** – The report has been submitted to WCB and was held for manual processing, but the Customer Records Clerk has finished processing the report and a claim number has been assigned. You will find the assigned claim number in the Processed Claim field when viewing the report summary details on the Search screen.

All reports that have been submitted and/or processed will be accompanied by a link to View & Print the report. In addition, reports that have already been processed (where the report status is either “Complete” or “Manual Processing Complete”) will have a second option to Move to History.

To print a hardcopy of the report, click on the View & Print link. A PDF (Portable Document Format) copy of the report will open in a new window using Adobe Reader®. You can print a copy of the report from here.

The Move to History link provides you with an option to archive old reports. This action does not *delete* the report from the system, but rather, moves the report from “active” view to “historical” view. One search criterion available on the Search Reports screen is the option to select between “Active” and “Historical” reports. If you select “Active”, the system will omit displaying any reports that have been moved to history. In contrast, if you select “Historical”, the system will display only reports that have been moved to history.

Important note: Once a report has been moved to history (historical view), it can no longer be moved back to active view. Please exercise caution when clicking on this link. Should a report be archived in error, the report can still be retrieved by selecting “Historical” from the Search Criteria.

Payment Remittance

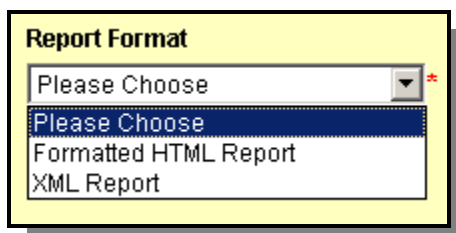
The Payment Remittance feature allows health care providers to obtain detailed payment remittance data online. To use this feature, the reports for must be submitted electronically.

The screenshot shows the 'Payment Remittance' section of the WCB Alberta online services. The header includes the WCB logo and navigation tabs: 'First Report', 'New Report from Existing', 'Search Reports', 'Payment Remittance' (selected), 'Help', and 'Logout'. The main content area is titled 'Payment Remittance' and contains a form with the instruction: 'Please enter your Payment Remittance Criteria and click Generate Report'. The form includes a 'Report Format' dropdown menu, a 'Disbursement Recipient' text box with two entries: 'A1A11101 - ABC CHIROPRACTIC (SMITH, J)' and 'A1A11102 - ABC CHIROPRACTIC (JONES, S)', a 'Report Week' dropdown menu, and a 'Sort By' section with three dropdown menus: 'First Sort', 'Second Sort', and 'Third Sort'. A 'GENERATE REPORT' button is located at the bottom right of the form. The footer contains copyright information: 'Copyright © 2002 Workers' Compensation Board - Alberta. All rights reserved.'

New remittance data is generated weekly every Tuesday morning and contains data on the previous week's submitted payments. Remittance data will be retained for viewing for one year through the electronic system. If you are required to retain the data longer for historical recording purposes, the data can be downloaded and saved to your local system.

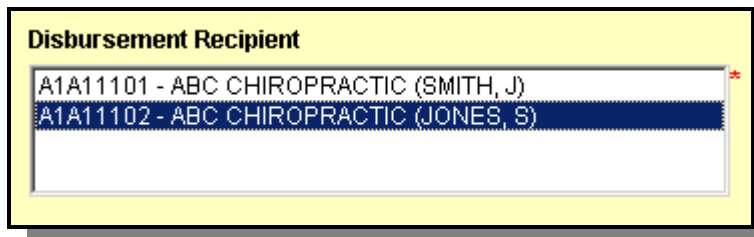
To request payment remittance data:

1. Choose the Report Format from the pull-down menu. The two available formats are:
 - Formatted HTML Report – to view the report online, or for printing
 - XML Report – for downloading into an existing computer application (e.g. Microsoft Excel)



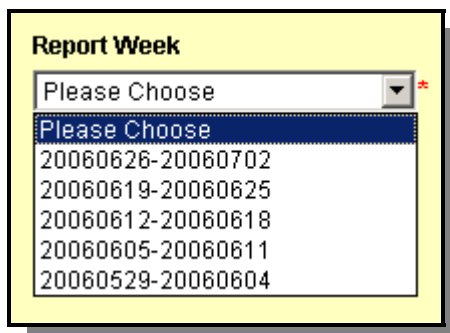
The screenshot shows a yellow-bordered box titled "Report Format". Inside, there is a dropdown menu with a downward arrow and a red asterisk. The menu is open, showing the following options: "Please Choose" (highlighted in blue), "Formatted HTML Report", and "XML Report".

2. In the Disbursement Recipient selection box, choose the billing number(s) to be reconciled. The Disbursement Recipient is the same as the cheque payee. Only one Disbursement Recipient can be chosen when generating a Formatted HTML Report. Multiple Disbursement Recipients can be chosen when generating an XML Report. To select multiple disbursement recipients, you can simply press and hold the <Ctrl> key down on their keyboard while clicking each billing number.



The screenshot shows a yellow-bordered box titled "Disbursement Recipient". Inside, there is a text box with a red asterisk. The text box contains two lines of text: "A1A11101 - ABC CHIROPRACTIC (SMITH, J)" and "A1A11102 - ABC CHIROPRACTIC (JONES, S)". The second line is highlighted in blue.

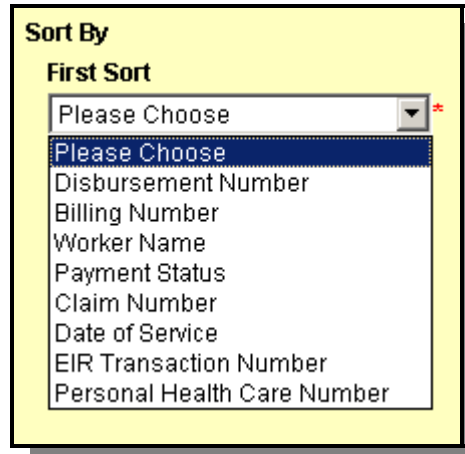
3. Select the Report Week from the pull-down menu. The pull-down menu will contain a list of sequential weeks in descending order, to a maximum of 52 weeks.



The screenshot shows a yellow-bordered box titled "Report Week". Inside, there is a dropdown menu with a downward arrow and a red asterisk. The menu is open, showing the following options: "Please Choose" (highlighted in blue), "20060626-20060702", "20060619-20060625", "20060612-20060618", "20060605-20060611", and "20060529-20060604".

4. Choose how the data should be sorted using the First Sort, Second Sort and Third Sort fields. Please note that only the First Sort is mandatory. The options for sorting are:

- Disbursement Number
- Billing Number
- Worker Name
- Payment Status
- Claim Number
- Date of Service
- Electronic Injury Reporting Transaction Number
- Personal Health Care Number



Sort By

First Sort

Please Choose

Please Choose

Disbursement Number

Billing Number

Worker Name

Payment Status

Claim Number

Date of Service

EIR Transaction Number

Personal Health Care Number

Note: the sort pull-down menus are dynamic. Once you have selected a First Sort, the Second Sort pull-down menu will become active, and whichever option you had selected as the First Sort will not be available as an option for the Second Sort (i.e. you cannot select the same field as both the first and second sorts). Similarly, once you choose a Second Sort, the Third Sort will activate, and its list of options will exclude the two previously selected sort fields.

5. Click on the Generate Report button. The report will immediately be generated and displayed in a new pop-up window for printing or saving.

Additional Help

Frequently Asked Questions

1. I can't log in!

Here are a few things to keep in mind when trying to log in:

- Ensure that you are at the correct login site. The address shown in the address bar of your web browser should read: <https://my.wcb.ab.ca>.
- Ensure your UserID is correct. If you have forgotten your UserID, click on “Forgot UserID” button, fill in the required information and your UserID will be emailed to you.
- Ensure the password is correct. The password is case-sensitive. If you have forgotten your password, use the “Forgot Password” button. The system will prompt you to enter the UserID and email address you selected when you registered online, and a new password will be emailed to you.

If you still cannot log on, please contact your Online Administrator, or the eBusiness Support Team.

2. How do I attach additional information to the report?

Electronic reporting does not allow for attachments to be submitted with chiropractic reports or invoices. Any additional information you wish to submit independently of your report must be faxed, phoned, emailed or mailed to:

WCB – Alberta
9912-107 Street
P.O. Box 2415
Edmonton, AB T5J 2S5

Email: ebusiness.support@wcb.ab.ca
Telephone: 780 498 3999
Toll-free: 1 866 922 9221
Fax: 780 498 7999

3. I am unable to find a report using the search feature.

There are several reasons why you may not be able to successfully retrieve a report for a patient. The most common reason is simply due to incorrect information that has been entered in the search criteria. Another common reason is that too many search criteria fields are entered (the search is too specific). In most cases, the report can be found by simply searching using the patient's last name. If this produces too many search results, the search can be further narrowed by using one additional search criterion along with the last name.

If you are still unable to find the report, contact the eBusiness Support Team before re-creating the report. The eBusiness Support Team will be able to verify whether or not the report truly exists.

4. When or why should a report be “Moved to History”?

The Move to History feature helps you to manage and organize your reports by allowing you’ve patient reports. By moving dated reports to history, you will be able to focus only on your active claims. If you are required to retrieve a report that has already been moved to history, you may simply select the “Historical” search option on the Search Reports screen.

5. Can I cut and paste text directly from my word processor?

Most advanced word processor tools (such as Microsoft Word or Lotus WordPro) contain special characters that are incompatible with the electronic injury reporting application. It is strongly recommend that you *not* cut and paste directly from such documents. There is, however, an effective workaround to do this:

1. Highlight and copy the information from your word processor
2. Paste the information into a simple text editing program such as Windows Notepad.
Doing this will remove any special characters
3. Highlight and copy the information again, this time from the Windows Notepad program
4. Paste the information into the electronic injury reporting application.

Contact Us

If this guide or the online help files do not answer your questions, the eBusiness Support Team is available for assistance.

eBusiness Support Team

Phone: 780 498 7688

Fax: 780 498 7866

Email: ebusiness.support@wcb.ab.ca

The eBusiness Support Team is available from 8:00am to 4:30pm Monday through Friday (excluding statutory holidays).